

Notary Public Request to Change Record

Please Type or Print Clearly in Ink

No Filing Fee

Mark all boxes that apply:

- ☐ I would like to use the new notary seal imprint below and will continue the use of my current notary seal. When I renew my commission, I am aware I will need to place an imprint of both notary seals on the application.
- ☐ I would like to discontinue the use of my current notary seal on file and use the imprint of the new notary seal below.
- ☐ I would like to change my name on my notary public commission and will use the imprint of the new notary seal below.
- ☐ I would like to change my mailing address on file to the address below.

Name as it appears on your commission _____

Date commission issued _____

County _____

Mailing Address _____ City _____ State _____ Zip _____

Complete the following for change of name:

Date of name change _____

Changed by ☐ court order or ☐ marriage

New name _____
(as appears on new notary seal)

I hereby state that the above information is true and correct. I understand that I will not be able to use the notary seal imprint until I am notified by the Secretary of State.

Dated _____ (Signature) _____

Place imprint of new seal here



Return to:

Secretary of State
Notary Division
500 E. Capitol, Suite 204
Pierre, SD 57501-5077
(605) 773-3537